

Thw #1632
 PTO/SB/21 (09-04)

TRANSMITTAL FORM
(to be used for all correspondence after initial filing)

Application Number	10/067,705
Filing Date	February 4, 2002
First Named Inventor	Sawyers, Charles L.
Art Unit	1632
Examiner Name	Thaian N. Ton
Attorney Docket Number	02307K-141317US

Total Number of Pages in This Submission

8

ENCLOSURES <small>(Check all that apply)</small>		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply-"Amendment" <div style="margin-left: 20px;"> <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) </div> <input checked="" type="checkbox"/> Extension of Time Request- 1 mo. per PTO/SB/22 enclosed in duplicate <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <div style="margin-left: 20px;"> <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53 </div>	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input checked="" type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <div style="margin-left: 20px;">Return Postcard</div>
<div style="display: flex; justify-content: space-between;"> <div style="width: 20%;"> <input type="checkbox"/> Remarks </div> <div style="width: 80%;"> The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430. </div> </div>		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	Townsend and Townsend and Crew LLP		
Signature			
Printed name	Jean M. Lockyer, Ph.D		
Date	January 5, 2006	Reg. No.	44,879

CERTIFICATE OF TRANSMISSION/MAILING			
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